

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>DN</i>	<i>32</i>	<i>12/18</i>
RESPONSE FORMALITY REVIEW	<i>A-M</i>	<i>50 580</i>	<i>03-30-01</i>
	<i>MT</i>	<i>593</i>	<i>04/23/01</i>

09768679

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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